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## Grader Schedle Form

This Grader schedule should be completed at the beginning of the semester by the Grader and course in structon confirmation emal. Or one by the Grader.

Course Number:			Term:
Enrollment:			Course Instructor:
Grader Name:			Signature:
Signature:			Email:
	# Hours	Tasks	
Week 1			
Week 2			
Week 3			
Week 4			
Week 5			
Week 6			
Week 7			
Week 8			
Week 9			
Week 10			
Week11			
Week12			
Week 13			
Wæk14			
Week15			
TOTAL			